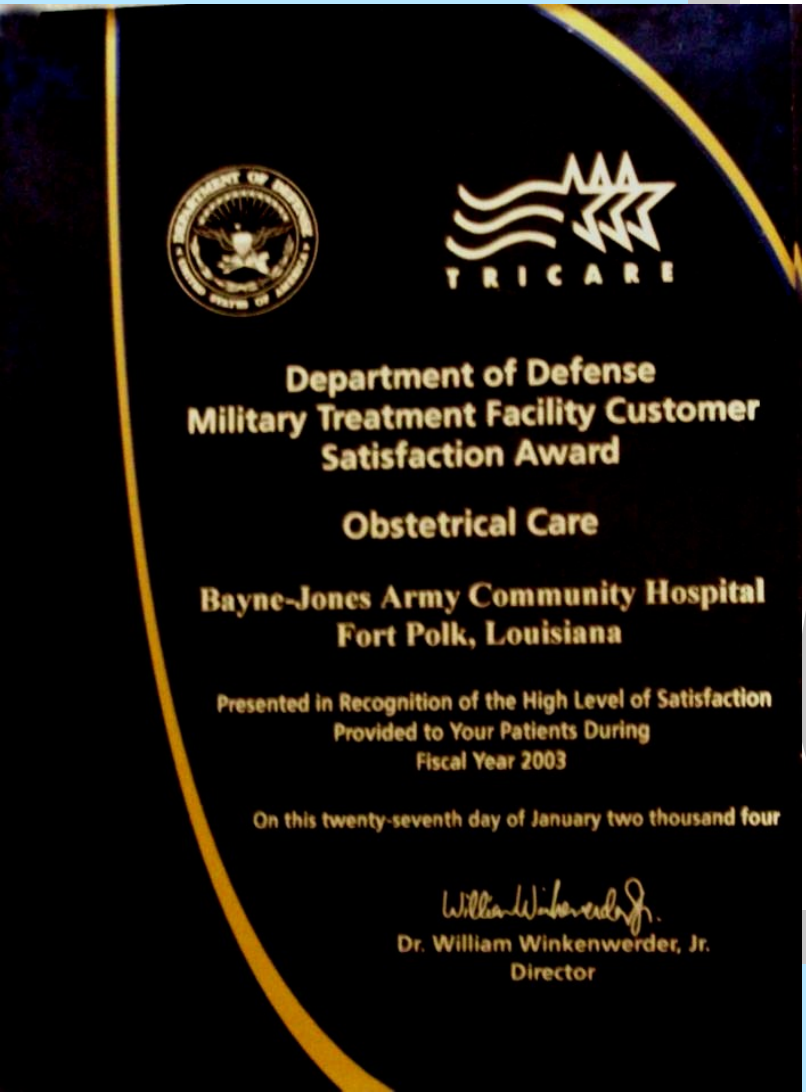
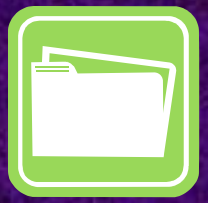
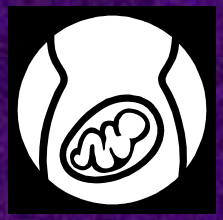
PRENATAL CARE



PRENATAL CARE





- Positive Pregnancy Test-
  What do I do now?
  OB CARE
- Transferring Prenatal Care to BJACH from another doctor or facility
- General Information
- What do we look like?

We Provide the Best!

Congratulations on your pregnancy!

First- Call the hospital appointment line to schedule an appointment for OB Orientation.

531-3011 OR 531-3705

At OB Orientation our clinic staff will set up your prenatal chart and order initial laboratory tests.

OB ORIENTATION

OB CARE

- OB ORIENTATION
- HOW TO GET APPOINTMENTS
- GOAL ORIENTED PRENATAL CARE
- REQUEST FOR LETTERS AND STATEMENTS
- CHILDREN
- ULTRASOUNDS
- NUTRITION
- EXERCISE DURING PREGNANCY
- TRAVELING DURING PREGNANCY
- ORAL CARE DURING PREGNANCY
- HAZARDS DURING PREGNANCY
- WARNING SIGNS
  - WHEN TO CALL THE DOCTOR
- MEDICATIONS DURING PREGNANCY
- PRENATAL CLASSES
- ACTIVE DUTY PREGNANT SOLDIER
- GETTING READY FOR DELIVERY
- NEWBORN CARE
- AFTER DELIVERY
- RESOURCES FOR ASSISTANCE
  - New Parent Support Program
  - WIC and Food Stamp Criteria
  - THE PARENT REVIEW NEWSLETTERS – E-MAILS
- TELEPHONE CONTACTS

OB ORIENTATION WHAT TO EXPECT!

- This will be a 3 part process.
- First – a quick briefing on what to expect, policies and procedures, and resources available to you.
- Second – Initiate your OB chart by completing basic medical and OB history.
- Third – Interview by licensed nursing personnel to review your record, assign you to either Women's Health clinic or Family Practice for OB care, and instructions for Lab tests and scheduling Ultrasound.
  - There are specific guidelines we use determine your clinic assignment
- There will be 3 questionnaires to complete regarding medical history, social history, and dietary assessment.
- Appointments, Lab tests, and Ultrasounds.
  - Lab tests can be done anytime beginning the day after the orientation. Be sure they have been completed prior to your appointment.
  - Ultrasounds can be scheduled beginning the day after the orientation. This is a separate appointment from your OB appointment.
  - If you have requested Prenatal Vitamins to be ordered – they can be pick up 48-72 hours after the orientation. Call the pharmacy first to be sure they are ready.
  - Your first appointment with a provider is normally made between 10-12 weeks of pregnancy. You will be called by your assigned clinic with your appointment.

–

Back

How to get Appointments

- **New OB Appointment with Provider- Your assigned clinic will call you with your appointment.**
  - Must have attended OB Orientation prior to scheduling.

OB Return Appointments

Family Practice Clinics – Following your new OB appointment, you will sent a letter with the times frames that each appointment should be scheduled. A date will be listed next to each time. This is the week that you will call for your OB return appointments. Appointments can be scheduled as soon as 24 hours and as far as 5 days in advance. Be sure to ask for the provider you have been assigned to for consistency of care. .

Women's Health Clinic – Please schedule your next appointment prior to leaving the clinic. Do not wait until the last minute. You may schedule with the provider you prefer but it is recommended that you see each one at least once.

Every effort will be made to meet your needs.

Please be sure to be 15 minutes early for your appointment so you can be checked in and screened prior to your appointment time. This will facilitate keeping appointments on time. If you are late your appointment may need to be rescheduled. Contact your clinics as soon as possible to schedule your appointment or to make any necessary changes. Appointment times are limited. If you need to cancel, please call your clinic as soon as possible in order to allow another patient to use that time.

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ROUTINE OB LAB TESTS DURING PREGNANCY

- **NEW OB TESTS**

At OB Orientation

- Complete Blood Count
- Blood Type and RH with Antibody screen
- Rubella Antibody Screen
- HIV (with permission)
- Cystic Fibrosis
- -Hepatitis B Antibody
- -Syphilis
- -Varicella Screen (Chickenpox- if indicated)
- -Urine culture

FIRST OB APPOINTMENT

With Provider

Labs tests as determined by provider

15-20 WEEKS OF PREGNANCY

Maternal Serum Screening (Triple Screen)

28 WEEKS OF PREGNANCY

Gestational Diabetes_Screen

(1 Hour Glucose Tolerance Test)

36 WEEKS OF PREGNANCY

Group B Strep Vaginal Culture (GBS)

Back

MATERNAL SERUM SCREENING FOR BIRTH DEFECTS

- Between 15 and 20 weeks of pregnancy you will be offered a blood test often referred to as the “Triple Screen”. This test can determine if your baby is at increased risk for certain *birth defects*. Some examples are: neural tube defects , abdominal wall defects , and Down syndrome.

- A negative triple screen is normal – no further testing will need to be done. A negative result does not guarantee that your baby will not have a birth defect. It only means that your baby in not at an increased risk of having a problem.

- A Positive triple screen does not mean your baby has a problem, only that there is an increased risk. If your test is positive, you will be offered a *referral* to a Perinatalogist who will counsel you, do a Level II ultrasound, and offer you an amniocentesis.

- Your doctor will discuss this test with you when it is time to consider testing. You may choose whether or not you want to have this test.

Back

Birth Defects

- Neural Tube defects: problems with the development of the baby's central nervous system that can range from a condition know as anencephaly (no brain development) to spina bifida (failure of the spinal column to fuse)

- Abdominal wall defects: failure of the baby's abdominal wall (stomach area) to develop properly. These conditions are called omphalocele and gastroschisis.

- Down Syndrome: a condition caused by an extra chromosome (three copies of chromosome 21 instead of two). Babies with this condition have some degree of mental retardation ranging from moderate to severe.

Back

Referral

- Perinatalogist: A doctor with special training in high-risk pregnancies.
- Level II Ultrasound ; Very detailed ultrasound to view all the systems and structures more clearly.
- Amniocentesis: A procedure of which removes a small amount of fluid surrounding the baby for analysis.

Back

GOAL ORIENTED PRENATAL CARE

- In January 2003, a new program for prenatal care was instituted at BJACH. It is called “GOAL ORIENTED PRENATAL CARE”.
- This means that for uncomplicated pregnancies, each visit has a specific goal to accomplish.
- Goal Oriented Prenatal Care was developed to ensure that each patient would receive the best possible prenatal care and use each appointment time more efficiently.
- The schedule for appointments is not the same as the traditional prenatal schedule.
- Patients with an uncomplicated pregnancy may find that they may not be seen as frequently under the goal oriented schedule.

- PRENATAL APPOINTMENT TIMELINE

Back

GOAL ORIENTED PRENATAL CARE TIMELINE

- **6-8 Weeks** – OB Interview to identify risk factors, set up OB chart, order initial lab tests, schedule an ultrasound (if indicated)
- **10-12 weeks** – Seen by provider who will perform an exam, review your medical history, set up a plan of care and discuss cystic fibrosis testing (if not already done at OB Registration).
- **16-20 weeks** – Discuss Maternal Serum Testing- Order 2nd trimester ultrasound
- **24 weeks** – Discuss preterm labor and what to watch for.
- **28 weeks** – Complete screening for Gestational Diabetes with 1 hour glucose challenge test. Receive instruction on Fetal Movement Counts.
- **32 weeks** – Begin planning for delivery. Begin development of Birth Plan.
- **36 weeks** – Pre-Registration for delivery at Admission Office on the 1st floor of hospital. Culture for Group B Strep.
- **38 weeks** – Discuss Labor Precautions; Braxton-Hicks contractions vs. active labor contractions; spontaneous rupture of membranes; fetal movement
- **40 weeks** – Preparing for delivery prior to 42 weeks
- **41 weeks** – Testing for Post-Term pregnancy.

BACK

REQUEST FOR LETTERS AND HOUSING STATEMENTS

- Request for housing statements or letters from Providers takes time to prepare.
- Housing Statements may take 1-2 days.
- Request for letters from Providers will take longer. Please allow at least 4-6 working days for the correspondence.
- There are several steps that must be done before you can receive the letter.

BACK

Children

If you bring a child to your appointment, please have another adult with you to watch the child. That way you can be paying attention to what the providers says. Children will not be allow in the exam room during exams or procedures.

CHILD CARE IS AVAILABLE WITHIN THE HOSPTIAL.

If you would like to use the Child Care Center, you will need to make arrangements ahead of time. **Please call** 531-3871 for more information.

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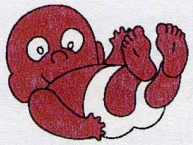
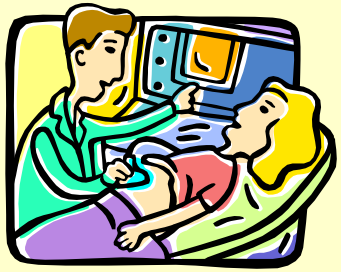
SATELLITE
CHILD CARE CENTER
AT BJACH

FOR YOUR CONVIENCE,
HOURLY CHILDCARE AVAILABLE FOR
PATIENTS WITH APPOINTMENTS

LOCATED ON THE 2ND FLOOR
ROOM 2657
HOURS OF OPERATION
0700-1700
MONDAY - FRIDAY



FOR MORE INFORMATION
CALL531-3871



ULTRASOUNDS

Normally, only two ultrasounds (US) will be performed during your pregnancy.

An **initial** ultrasound will be ordered to verify your due date.

A **second** US will be ordered around 20-24 weeks to check on the baby's growth. If you would like to know the gender of the baby, it may be seen at this US

Your provider may decide to order additional ultrasounds for medical indications such as fetal growth, placental location, vaginal bleeding, etc.

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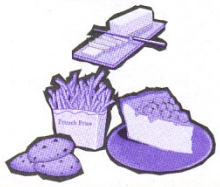
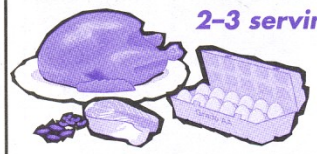
Food Guide Pyramid: A Guide to Healthier Eating

Fats, Oils, Sweets
Limit



Milk Group
3–5 servings a day
Need 1200–1500mg daily

Protein Group
2–3 servings a day,
total of 6–7 ounces daily



Vegetable Group
3–5 servings a day

The best sources of fiber are potatoes with skin, carrots, peas, broccoli, cauliflower, and corn.

Fruit Group
2–4 servings a day

The best sources of fiber are apples, oranges, pears, and strawberries.

Grain Group
6–11 servings a day

The best sources of fiber are whole grains and breakfast cereals.

Avoid too much weight gain.

- Limit all juice to two 4-ounce servings per day or one 12-ounce regular soda.
- You're not "eating for two." At 4 months, add an extra 300 calories per day. Examples of 300 calories include a sandwich with two ounces of meat or a small peanut butter and jelly sandwich or two 8-ounce glasses of milk.
- A value meal at typical fast food restaurant has about 1500 calories, which is almost a full days worth of calories!
- Limit fried foods and high fat meats such as ribs and sausage. Choose lean cuts of meat such as "loin" cuts and trim visible fat.
- Use mayonnaise, salad dressings, and oils sparingly.
- If you need to, just cut back.
- Remember to exercise. Walking and being active in your daily routine counts!
- Make an appointment with a dietitian to address your individual needs.

NUTRITION

Eating for two does not mean that you eat twice as much.
It means that what you eat affects both you and your baby.

Do's and Don'ts

- **Take your vitamin supplements as prescribed.**
- **Get some form of exercise daily.**
- **Drink AT LEAST 8-10 glasses of water daily.**
- **Keep caffeine in moderation**
- **Do NOT diet to lose weight.**
- **Do NOT drink alcohol**
- **Do NOT use tobacco products.**

- **Recommended Weight Gain**
- **1st trimester is 1 pound a month.**
- **2nd and 3rd trimester – 1 pound per week.**

- **Nutrition Care staff is available to assist you anytime during your pregnancy. If you have any concerns regarding food allergies, likes and dislikes, or excessive weight gain or any other concern or questions you have..**
- **You can call the Nutrition Care division at any time or**
- **ask you provider to put in a consult for you.**

531-3129

Back

EXERCISE DURING PREGNANCY

- **ACOG EXERCISE GUIDELINES**

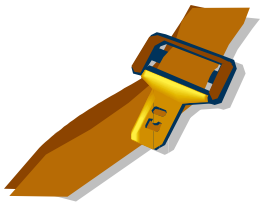
- **1. During pregnancy you can continue your mild-moderate exercise routines. It's best to exercise at least three times a week for 20 – 30 minutes at a time. A brisk walk is best.**
- **2. Don't exercise in supine position (flat on your back) after the first trimester (14 weeks). It can decrease the blood flow to the uterus. Also don't stand motionless for long periods of time**
- **3. You will have less oxygen available for aerobic exercise during pregnancy, so modify the intensity of your routine accordingly. Don't exercise to exhaustion.**
- **4. Don't do exercises in which you lose your balance, especially in the third trimester (28 weeks). Avoid any exercises that risk even mild abdominal trauma.**
- **5. You need an additional 300 calories a day during pregnancy. So if you are exercising, be particularly careful to ensure an adequate diet.**

- **6. Be sure to stay cool when exercising, especially during the first trimester. DRINK LOTS OF WATER! Wear cool clothing, and don't work out in too hot an environment.**
- **7. After birth, resume your pregnancy exercise routine gradually, based on your physical capacity.**

Listen to your body. If you can't talk while exercising – slow down. Be sure to do warm up exercises and cool down exercises. Don't try to push yourself.

TRAVELING DURING PREGNANCY

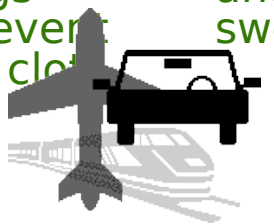
- Traveling during pregnancy is not prohibited but some precautions must be taken;
  - Avoid long trips if possible.
  - Always check with your provider before traveling.
    - Traveling by auto –
      - Wear your seatbelt! The shoulder belt goes between your breasts and the lap belt goes under your tummy.
      - Plan for frequent stops. Get out and walk as much as you can. This will prevent swelling in your feet.



Traveling by air-

The air is dry – drink extra fluids.

Walk around when you can. Do isometric exercises of your legs and feet to help prevent swelling and blood clots.



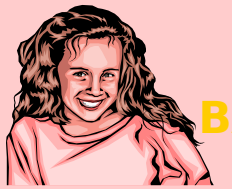
- Do not plan to travel after 34 weeks of pregnancy. The chances of going into labor increase as you get closer to your due date. For your safety, stay close to home.
- TRICARE considers pregnancy a pre-existing condition at 34 weeks. This means that if you travel without authorization and you go into labor you could be charged for the delivery and hospitalization. To be safe have family and friends come visit you instead.

Back

ORAL CARE

- It is easy to have an increase in dental decay cavities due to pregnancy. Heartburn, increased snacking, morning sickness can all increase your chances of developing tooth decay or gum disease. Good oral care is as important during pregnancy as it is any other time of your life.
  - Continue seeing your dentist on a regular basis.
  - Should you need to have any dental work done it is advised to have it done after the 1st trimester (12 weeks).
  - Limit any dental x-rays – be sure a lead shield is used.
  - If you must lie in a dental chair for a long period of time take a sweater with you place it under either hip so you are not lying directly on your back.
  - If you dentist has any questions, particularly regarding medications, have the dentist contact your provider for clarification.
  - Be sure to drink lots of water and ensure you are getting plenty of calcium.

  Good dental hygiene now sets the example for your children later.



BACK

HAZARDS DURING PREGNANCY

- Hazards affect the normal functions of the mother and unborn baby's body. They can cause birth defects in the unborn child. Hazards include physical factors, germs, tobacco, alcohol, health conditions of the mother, chemicals, and drugs.
- HAZARDOUS SUBSTANCES
- GERMS: BACTERIA AND VIRUSES
- CHEMICALS AND DRUGS
- MOTHER'S MEDICAL CONDITION
- PHYSICAL FACTORS.

Back

HAZARDS: GERMS

- **Germs can cause minor illnesses in the mother but can be deadly to the unborn child.**
- **Some illnesses that are of concern ar**
  - **Rubella measles**
  - **Fifth Disease**
  - **Hepatitis**
  - **Chickenpox**
  - **Toxoplasmosis found in cat litter boxes or in raw meats.**

If you have had any of these diseases as a child, you have developed an immunity that will protect your baby.

If you think you might not be immune to a disease you've been exposed to, contact your provider.

Back

HAZARDS: LISTERIOSIS

- **Listeria is a type of bacteria found everywhere (soil, ground water, and on plants) which in contaminated foods can cause illness in people whose immune system can be decreased – such as during pregnancy. Listeria can be transmitted through the placenta even if the mother is not showing signs of illness. This can cause premature delivery, miscarriage, stillbirth, or serious health problems for the newborn.**
- **In pregnant women, listeriosis may cause flu-like symptoms with sudden onset of fever, chills, muscle aches, and sometimes diarrhea or upset stomach.**
- **Listerosis can be treated with antibiotics which can help prevent infection in the fetus.**
- **Ways to prevent infection:**
  - **CLEAN – Wash your hands and surfaces often.**
  - **SEPERATE – don't allow cross-contamination between raw and cooked foods.**
  - **COOK – Cook to proper temperatures – use a food thermometer**
  - **CHILL – refrigerate or freeze promptly.**

BACK

HAZARDS: SEXUALLY TRANSMITTED DISEASES

- **Sexual intercourse can also spread infections. Sexually transmitted diseases (STD) include:**
  - **Herpes**
  - **Syphilis**
  - **Chlamydia**
  - **Gonorrhea**
  - **Trichomoniasis**
  - **Aids /HIV**
  - **HPV**

Some are treatable and some are not.

Best way to decrease your chances of acquiring these diseases are:

- remain with one partner

- use condoms (male or female) with spermicide.

Back

HAZARDS: HAZARDOUS SUBSTANCES

- **Hazardous substances can enter a mother's body by being absorbed, ingested, inhaled, or injected.**
- **Absorbed hazards include fertilizers, and pesticides**
- **Injected hazards include medications, alcohol, herbal remedies, and illegal drugs.**
- **Inhaled hazards include carbon monoxide, natural gas, cigarette smoke, and fumes from glues, spray paints, chlorine, and other chemicals.**

Back

HAZARDS; CHEMICALS AND DRUGS

- **Pregnant women should not use street drugs.**
- **Avoid aspirin and caffeinated products**
- **Always check with your provider before using any vitamins, over the counter medications, or herbal remedies.**
- **Avoid chemicals in the workplace or home such as heavy duty cleaning products, toluene (found in paints), and pesticides.**

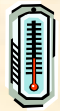
BACK

HAZARDS : MOTHER'S MEDICAL CONDITIONS

- **Women who have a medical condition that can affect pregnancy should discuss them with their provider before becoming pregnant. These conditions include diabetes, lupus, multiple sclerosis, high blood pressure, asthma, and Rh blood incompatibility**
- **Many medical problems can be controlled with proper doctor supervision.**

Back

HAZARDS: PHYSICAL FACTORS



Excessive Heat – Avoid saunas and hot tubs. Be careful not to overexert when exercising.

Safety Issues – Avoid low-level radiation unless necessary. Be sure your abdomen is covered with lead shield during dental or other x-rays. Always wear your seat belt when in an automobile.

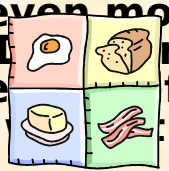
Domestic abuse – this includes physical, emotional, and ve

isolation. financial, exploitation
Sometimes it only occurs during pregnancy.

Exercise – Exercise is recommended during pregnancy, with ne

restrictions. Avoid activities that involve weight burdens, ncing or
jarring motions, jumping, or sudden jerking or impact . Always check
with your provider on what exercise and sports are safe.

aying Healthy – Remember that what affects you can affect your baby as well. A healthy life style is even more important now than ever. Be good to yourself and your baby. D mit healthy living during pregnancy – After delivery, leading a he festyle is an important par king care of your children and : the example for them for the future.



BACK

FAMILY PRACTICE CLINICS
531-3011
Ask for the Advise Nurse

If experiencing bleeding:
20 weeks or less go to the
Emergency Room.
531-3368/69

21+ weeks – Go to
Labor & Delivery (LDRP)
531-3644

WOMEN'S HEALTH CLINIC
531-3705
For guidance

Call LDRP
when clinics are closed
531-3644

BACK

WHEN TO CALL THE DOCTOR

Sometimes problems arise during your pregnancy. Should any of these symptoms occur, *call your clinic immediately or Labor & Delivery after duty hours.* Do not wait until your next scheduled appointment.

These warning signs are:

* Bright red vaginal bleeding with or without pain
* Gush of fluid from your vagina or uncontrolled leakage
* Severe, continuous abdominal pain
* Nausea & vomiting lasting longer than 24 hours
* Inability to keep liquids down that results in decreased urine
* Pain or burning with urination
* **Fever of 100.5 degrees Fahrenheit or higher**
* *SIGNS OF PRE-TERM LABOR* {Prior to 36 weeks}
  - 4 or more contractions within 1 hour, which do not go away after resting, emptying bladder & drinking 3 - 4 glasses of water
  - Menstrual type cramps or strong ache in lower abdomen
  - Sensation of the "baby rolling up in a ball" or "pushing down"
  - Intermittent pelvic pressure
  - Low, dull backache
  - Intermittent abdominal cramping {may be associated with diarrhea}

* *SIGNS OF PRE-*ECLAMPSIA
  - High blood pressure (Blood pressure 140/90)
  - Persistent severe headaches
  - Visual changes such as bright, white spots, blurred vision or loss of sight
  - Weight gain of 4+ lbs, per week

MEDICATIONS DURING PREGNANCY

Medications you can take during pregnancy:

You should take only medications approved by your Provider. The following "*over-the-counter*" (*OTC*) drugs are safe to take during pregnancy:

* *Headaches:*
  - Tylenol or Tylenol Extra Strength as directed
  - Datril
* *Cold:*
  - Tylenol
  - Sudafed
  - Benadryl for nasal congestion
  - Saline nose drops
  - Robitussin Cough Syrup {no alcohol}
  - Cepacol Lozenges for sore throat
  - Cough drops

May also OTC Claritin for allergy symptoms.

* *Constipation:*
  - Metamucil
  - Fiber-All
  - Colace
  - Milk of Magnesia
* *Diarrhea:*
  - Kaopectate
* *Indigestion:*
  - Tums or Rolaids
  - Maalox or Mylanta II
  - Riopan
* *Hemorrhoids:*
  - Preparation H
  - Anusol Suppositories
  - Tucks {witch hazel pads}
* *Nausea & Vomiting:*
  - Vitamin B6 {up to 75 mg/day}
  - Emetrol
  - Unisom

Ginger 250 mg 4 times a day

* *Yeast Infection /Vaginal Itching:*
  - Monistat
  - Gyne-Lotrimin

If these medications do not help, contact your clinic..

- Many of these medications are available at the Pharmacy for those who have attended the ***Self-Care / Over the Counter Class*** given by the Pharmacy twice a month. This service can help save a lot of money for families, particularly when both parents have attended this class. ***Call 531-3255 to register.***

- Remember to always check with your provider before taking any prescribed, over-the-counter medications or herbal remedies, or getting any immunizations during your pregnancy.

- Tetanus and Flu immunizations can be given during pregnancy. Your provider can determine if you are a candidate for these

Back

Are You in an Abusive Relationship? Here are some warning signs:

▶Use emotional and psychological control?

- Call you names, yell, put you down, make racial or other slurs, or constantly criticize or undermine you and your abilities as a wife, partner or mother?
- Behave in an overprotective way or become extremely jealous?
- Prevent you from going where you want to, when you want to, and with whomever you choose as a companion?
- Humiliate or embarrass you in front of other people?

▶Use economic control?

- Deny you access to family assets such as bank accounts, credit cards, or car?
- Control all finances, force you to account for what you spend or take your money?
- Prevent or try to prevent you from getting or keeping a job or from going to school?
- Limit your access to healthcare, prescriptions or dental insurance?

▶Make threats?

- Threaten to report you to the authorities (the police or child protective services) for something you didn't do?
- Threaten to harm or kidnap the children?
- Display weapons as a way of making you afraid or directly threaten you with weapons?
- Use his anger or "loss of temper" as a threat to get you to do what he wants?

▶Commit acts of physical violence?

- Carry out threats to hurt you, your children, pets, family members, friends, or himself?
- Destroy personal property or throw things around?
- Grab, push, hit, punch, slap, choke or bite you?
- Force you o have sex when you don't want to or to engage in sexual acts that you don't want to do?

NO ONE SHOULD NOT BE TREATED THIS WAY! Call 531-HOPE (4673)

ACS offers confidential counseling. Call 531-1941

Let your provider or any staff member know – we can help!

BACK

ARE YOU DEPRESSED?

- **These questions may help you identify feelings of depression. If you answer "yes" to a number of these questions or "yes" to the last question, *contact your provider for assistance.***

- **In the past several weeks, have you noticed any of the following changes:**
  - **Loss of interest in pleasurable activities**
  - **Difficulty concentrating?**
  - **General fatigue or loss of energy?**
  - **Difficulty sleeping or an increased need for sleep?**
  - **Excessive or inappropriate guilt?**
  - **Feelings of worthlessness?**
  - **Feelings of hopelessness?**
  - **Recurring thoughts about death or suicide?**

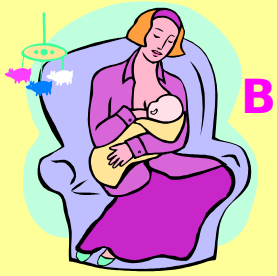
BACK

Prenatal Classes

- Prenatal Classes are offered as an added bonus to your prenatal care. These classes serve to increase your knowledge about pregnancy and will enable you to understand the physical and emotional changes you will be going through and thus decrease your anxiety and help you enjoy this wondrous period of your life. All pregnant patients and their partners are invited to attend. Most classes are given in the 5th floor classroom.

FETAL DEVELOPMENT

Every pregnancy has aspects that are both unique and universal. This class will cover common medical tests and procedures, fetal development month by month, nutrition and exercise, signs of pre-term labor, and common discomforts and their remedies.



BREASTFEEDING BASICS:

This class provides important information on getting breastfeeding off to the right start. It includes preparation before delivery, benefits of breastfeeding, correct positioning, proper latch-on, how often to breastfeed, sign's baby getting enough, AND MUCH, MUCH, MORE!!!

CONTINUED

PRENATAL CLASSSES – CONT.

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LABOR & DELIVERY

THIS CLASS IS RECOMMENDED DURING THE LAST 3 MONTHS OF PREGNANCY. An overview of common medical procedures, the anatomy and physiology of labor, the stages of labor, effacement and dilation, fetal descent, and pelvic station, and options for medications in childbirth (including epidural anesthesia) will be discussed. We view and discuss 3 birth stories narrated by parents from diverse backgrounds as well as a realistic picture of an unplanned Cesarean birth.

NEWBORN CARE /INFANT CPR

Every newborn is unique. This class illustrates key aspects of newborn behavior and development. We will discuss newborn's physiologic response to birth, newborn appearance, procedures in the birth setting, feeding sues, elimination patterns, sleep patterns, diapering, dressing, umbilical cord care, sponge bathing, circumcision care and care seat safety. Infant CPR is not a credentialing course, but will offer participants an opportunity to learn and practice rescue for choking and CPR for infants.

LAMAZE / BREATHING AND RELAXATION FOR LABOR

During the last 3 months of pregnancy, the Lamaze / Breathing and Relaxation Class is highly recommended for its hands-on and often fun approach to dealing with labor, delivery, and recovery after birth. This class teaches everything from positioning, relaxation, and breathing exercises, what to expect prior to labor beginning. Participants will learn how to relax and breath through vaginal exams, epidurals, and other uncomfortable medical procedures. Stages of labor, effacement and dilation, fetal descent, pelvic station, and how to handle back labor will be discussed. Each phase of the labor process along with how and when to change to a new breathing pattern will be introduced and practiced during the class. We will learn about various pain medications, epidurals, and inductions. A complete Cesarean preparation and birth is also shown. PLEASE BRING AT LEAST 2 BED PILLOWS AND A MAT OR BLANKET TO THE CLASS.

CONTINUED

PRENATAL CLASSES – CONT.

SIBLING PREPARATION

This class is recommended during the last 3 months of pregnancy. Preparing siblings for the arrival of a new baby can be as confusing as it is joyous. Siblings ages 2-10 are asked to attend with one or both parents. The children will have hands-on practice with dolls to learn how to interact with a new baby. Everyone will tour the LDRP unit at the close of the class.

TOUR OF LDRP Unit

1ST Friday of each month – 1300-1400 4th floor . Meet next to the elevators

Tours are provided by the staff of the Maternal –Child Unit. Tour the areas you will be during your labor and delivery and postpartum periods. Please call prior to tour to confirm.

531-3644. Tours may be delayed If LDRP is very busy.

Tours are also given with most prenatal classes.

Most classes are located on 5th Floor classroom

CALL 531-3705 TO SIGN UP or for more information.

BACK

ACTIVE DUTY PREGNANT SOLDIERS

- Pregnancy Profile
- Active Duty Pregnancy Exercise P
- Occupational Health Counseling

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Back

ACTIVE DUTY PREGNANCY PROFILE

CONTINUATION *(From page 1, Item 10)*

REFERENCE AR-40-501: Paragraph 7-9 14 December 2007

RESPONSIBILITY:

1. The soldier will seek medical confirmation of pregnancy and will comply with the instructions of medical personnel and the individual's unit commander.
2. A privileged provider will initiate a Pregnancy Profile for the duration of the pregnancy.

EFFECTIVE IMMEDIATELY:

1. The soldier should not be reassigned overseas commands until pregnancy is terminated. She may be assigned within CONUS. Medical clearance must be obtained prior to any reassignment.
2. Soldier will not receive assignment to duties where nausea, easy fatigue, or sudden lightheadedness would be hazardous to the Soldier, or others, to include all aviation duty, Classes 1/2/3
3. Restrict exposures to military fuels, Pregnant Soldiers must be restricted from assignments involving frequent or routine exposures to fuel vapors or skin exposure to spilled fuel such as fuel handling or otherwise filling military vehicles with fuels such as mogas, JP8, and JP4.
4. No weapons training in indoor firing ranges due to airborne lead concentrations and bore gas emissions. Firing weapons is permitted at outdoor sires. No exposure to organic solvent vapors above permissible levels.
5. No work in motor pool involving painting, welding, soldering, grinding, and sanding on metal, parts washing, or other duties where the Soldier is routinely exposed to carbon monoxide, diesel exhaust, hazardous chemicals, paints, organic solvents vapors, or metal dusts and fumes. This does not apply to Soldiers who perform preventative maintenance checks and services on military vehicles using impermeable gloves and coveralls, or does it apply to soldiers who do work in areas adjacent to the motor pool bay.
6. The Soldier should avoid excessive vibrations. Excessive vibrations occur in larger ground vehicles (greater than 1 ¼ ton) when the vehicle is driven on unpaved surfaces.
7. Upon the diagnosis of pregnancy, the Soldier is exempt from regular unit physical fitness training and APFT testing/weight standards for the duration of the pregnancy and 180 days past pregnancy termination. After receiving medical clearance from health care provider to participate in physical training, commanders will enroll Soldiers who are pregnant or postpartum to take part in the Army Pregnancy/Postpartum Physical Training (PPPT) program in accordance with AR 350-1.
8. Soldier is exempt form wearing load bearing equipment (LBE) to include the web belt, individual body armor and/or any other additional equipment.
9. The Soldier is exempt form all immunizations except influenza and tetanus-diphtheria and from exposure to all fetotoxic chemicals and wearing MOPP gear at any time.
10. The Soldier may work shifts.
11. The Soldier must not climb or work on ladders or scaffolding.

AT 20 WEEKS OF PREGNANCY: (For this Soldier: ____/____/____)

1. Soldier is exempt form standing at parade rest or attention for longer than 15 minutes.
2. Soldier is exempt from participating in swimming qualification, drown proofing, field duty, and weapons Training.
3. Soldier should not ride in, perform PMCS on, or drive in vehicles larger than light medium tactical vehicles due to concerns regarding balance and possible hazards from falls.

AT 28 WEEKS OF PREGNANCY: (For this Soldier: ____/____/____)

1. Soldier must be provided a 15 minute rest period every 2 hours.
2. The Soldier's workweek should not exceed 40 hours.
3. Soldier should not work more than 8 hours in any one day. The 8-hour work day doe include one hour for physical training and the hours worked after reporting to work or work formation, but does not include the PT hygiene time and travel to and from PT.

The intent of these provisions is to protect the fetus while ensuring productive use of the Soldier. Common sense, good judgment, and cooperation must prevail between policy, Soldier, and Soldier's commander to ensure a viable program. Further questions regarding specific issues covered within this profile should be addressed with the Soldier's provider or Chief, Department of OB/GYN, Bayne-Jones Army Community Hospital.

Back

Soldier Training Ability Readiness & Spirit

Welcome to the STARS Fitness Program

STARS is the fitness program for active duty pregnant soldiers providing quality care through exercise and health education. This program lowers rates of pregnancy complications, increases the number of favorable deliveries and pregnancy outcomes, maximizes soldier fitness and lowers health care costs.

Once a soldier has a positive pregnancy test, she should contact her primary provider to obtain a pregnancy profile. If the soldier needs a profile other than the standard one issued, an appointment will need to be made with her provider.

To enroll in STARS – take a copy of the profile to Health Promotions located at Bld. 3504 Georgia Ave,. You can call 531-3567 / 6880 for more information

SCHEDULE

Monday, Wednesday, Friday –
Low Impact Aerobics >
Wheelock Gym
0615-0715

Tuesday – Aquatic Exercise
0630-0730
50-meter pool next to hospital

Thursday – Classroom Instruction
0745-0900
Wellness Center – Bldg 3504

The Commanding General mandates that

ALL PREGNANT SOLDIERS

will participate in this program. A roster is given to your unit at the end of every month stating who has and who has not participated. Your command has the authority to take disciplinary action against you if you do not attend. If you are not going to be there for any reason; (i.e. appointment, duty, etc.) then please notify

Back

Occupational Health Counseling

- **The Department of Preventive Medicine, Occupational Health Section has a program identified as Pregnancy Surveillance-Reproductive Hazards, which is mandated by Army Regulation 40-501. The intent of this program is to protect the fetus, while ensuring productive utilization of the soldier. This program applies to DOD employees as well.**

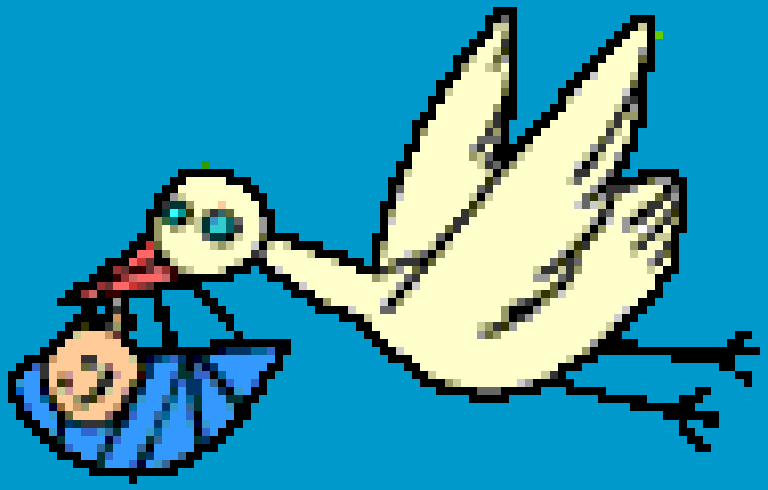
- **When you attend the STARS Program a representative from Occupational Health will meet with you to complete MEDDAC OP 435 A&B and assess risks that may be associated to you and the fetus in your environment, which may have adverse pregnancy outcomes. Once these forms are completed, obtain a copy to have placed in your prenatal chart.**

- **Please contact the occupational Health Technician at 531-6131/4288 for any questions, concerns or additional information that you may have.**

BACK

GETTING READY FOR DELIVERY

- **Pre- Admission**
- **Birth Plans**
- **When to Come to the Hospital**
- **Inductions**
- **Scheduled C/Sections**



BACK

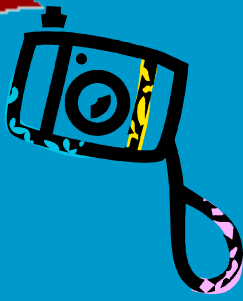
PRE-ADMISSION FOR DELIVERY

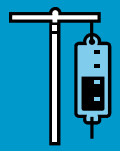
- **<u>Every OB patient</u> should pre-admit for their hospital stay.**
- **At or about 36 weeks of your pregnancy, you should go to the Admissions Office located on the 1st floor of the hospital by the elevators. The clerks there will need your ID Card and will "pre-admit" you to the hospital.**
- **The clerks will take some basic information about you to speed up the admission process and to use for the baby's birth certificate.**
- **Pre-admission saves you time and hassle when it is time for your baby to be born.**

Back

BIRTH PLANS

- Birth Plans are your way to communicate to your provider and staff how you would like your labor, delivery and postpartum care managed as long as there are no complications.
- Plans can cover such items as:
  - Environment
  - Mobility
  - Hydration
  - Monitoring
  - Pain Relief Offered/ Options
  - Pictures
  - Pushing
  - Perineal Care
  - If there is a Cesarean Section
  - Who to call if there is an emergency
  - Baby Care
    - After delivery
    - Cutting the Cord
    - Feeding the baby
    - Pacifiers ?
    - Separation / rooming In
    - If the baby is sick
    - Circumcision





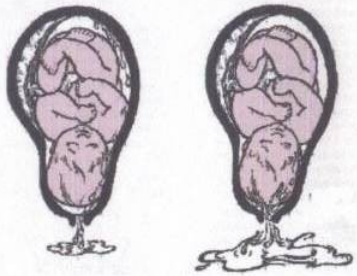
- Be sure to have your birth plan reviewed by you r provider. There is a “Birth Plan” form that you up at the OB/GYN Clinic

Back

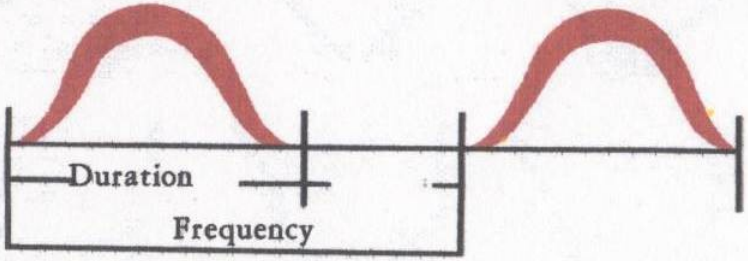
BACK

WHEN DO I COME TO THE HOSPITAL?

1. Contractions every 3-5 minutes or less, lasting 60 seconds, for at least 1 hour
2. If your bag of water or membrane breaks or is leaking.
3. If there is bleeding like a period.
4. If there is decreased or no movement of the baby.



How do I time contractions?



FREQUENCY - Beginning of one contraction to the beginning of the next.

DURATION - Beginning of the contraction to the end of the same contraction.

Where do I go?

FIRST -

Call before coming to the hospital.

During duty hours **call your clinic.**

Family Practice Clinics - 531-3011

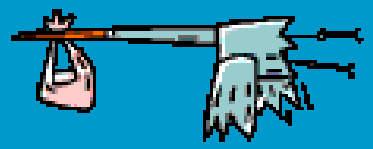
OB Clinic 531-3705

After duty hours **call Labor & Delivery at 531-3644**

You will be directed on where to go.

BACK

INDUCTIONS

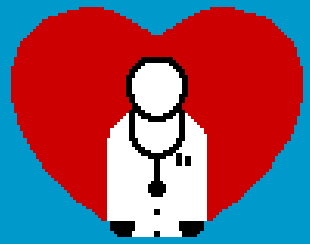


- **Induction of labor is done only for medical indications. Some indications include:**
  - **Postdates: Greater than 41 weeks of pregnancy – no longer than 42 weeks.**
  - **Pre-Eclampsia : High Blood pressure condition of pregnancy**
  - **Diabetes: Delivery prior to 40 weeks is preferred for insulin dependent diabetics**
  - **History of rapid labor and delivery**
  - **Medical Conditions as indicated by Provider**

Back

SCHEDULED C/SECTIONS

- If you are going to have a scheduled Cesearn Section your provider will discuss with you when your section will be scheduled. Be sure you have pre-admitted for your hospital stay.
- A few days before your surgery you will be scheduled to go to Same Day Surgery located on the 2nd floor to make an appointment with Anesthesia and set up you pre-op blood tests.
- **The day before:**
  - No food or liquids of any kind after midnight
  - No tobacco products
  - No medications (unless directed by your provider or anesthesia)
  - Shower with special cleanser as directed.

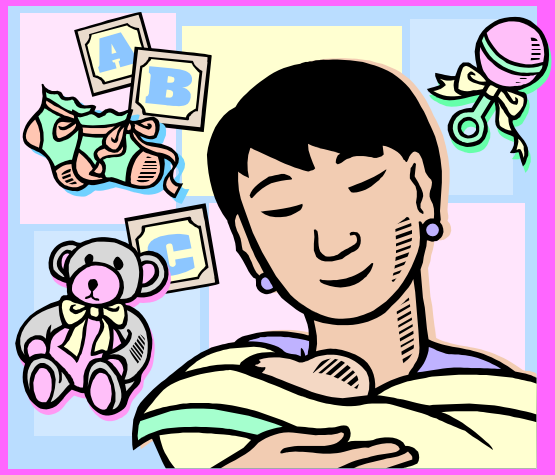


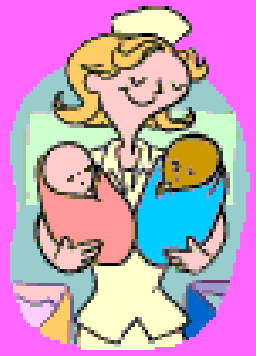
- **The Day of surgery:**
  - Shower again with the special cleanser.
  - Leave any valuables and jewelry at home
  - Do not wear make-up, hair spray. Metal hair pieces, contact lenses, fingernail or toe nail polish, lotions, or perfumes. A small amount of deodorant is fine.
  - Call LDRP at 0500 to verify your surgery will occur as scheduled. Be at the LDRP no later than 0530.
- **What to bring with you:**
  - ID Card - 2-3 non-see-through nightgowns
  - Non-see-through robe - Non-skid slippers
  - 2-3 properly fitted bras - 3-4 pairs of cotton underwear
  - Toilet articles – Toothbrush, toothpaste, shampoo, soap, comb, brush, makeup, etc.
  - Hairdryer - Small clock
  - Calling Card for long distance calls
- **How long will you stay in the hospital?**
  - Expect to stay about 2-3 days.
  - You can go home when:
    - You have no fevers
    - You are able to tolerate regular diets
    - Able to take care of yourself and the baby
    - No other complications are present

BACK

NEWBORN CARE

- PREPARING FOR BABY
- BREAST OR FORMULA
- ??CIRCUMCISION
- SAFETY IN THE HOSPITAL
- NEWBORN PROCEDURES
- CAR SEATS





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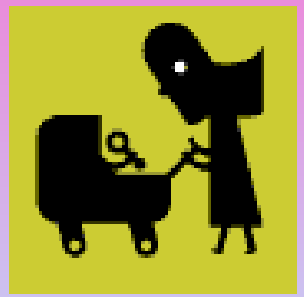
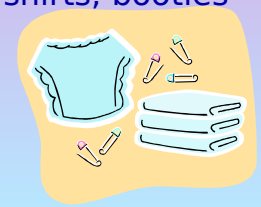
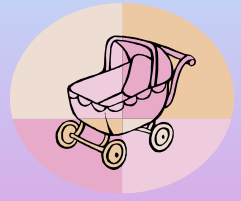
PREPARING FOR BABY



Layette: Basic-

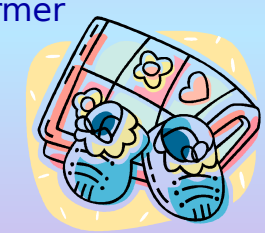
- Car Seat
- Crib
- Clothes: Sleepers, t-shirts, booties
- Receiving blankets
- Comforter
- Crib Sheets
- Crib pads
- Bumper pad
- Diaper Bag
- Breastfeeding- breast pump, Breast pads, Nursing bras
- Formula – bottles, nipples, formula with iron
- Diaper Pail
- Thermometer
- Suction bulb
- Cool mist humidifier
- Disposable diapers
- Mobile
- Cord Care – rubbing alcohol, cotton balls





Nice to have

- Bassinet or cradle
- Changing table
- Swing
- Playpen
- Snugly front carrier
- Baby monitors
- Stroller
- Bottle Warmer



Later –

- High Chair
- Pacifiers
- Gates
- Electric outlet covers
- Cabinet locks
- Toilet locks
- Teething rings
- Cup
- Spoon

READ – ATTEND CLASSES – READ – ATTEND CLASSES - READ

BACK

BREAST OR FORMULA

Successful breast feeding is not determined by the mother or baby alone. Each child is different and may need different techniques to be successful. Patience and persistence is important. Baby does not know any more about breast feeding than mother. This is a time for both to get to know each other. Nature has given your baby some unique abilities to help the baby to feed and get adjusted to the breast. Extra fat allows the baby time to learn how to feed without decreasing baby's need for food. Hunger is a learned process that takes place the first few days of life.

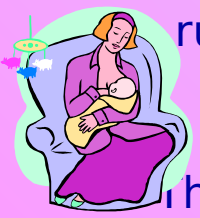
- **FOR BABY-**
  - **Your body makes the most perfect food for your baby. Your breast milk changes according to your baby's needs and is most easily digested.**
  - **All the necessary nutrients and fluid are provided for up to six months of age when many infants begin to eat solids. After that it supplements older babies diets with the needed nutrients and vitamins needed to make the adjustment to solids foods.**
  - **Your breast milk is your baby's first immunization.**
  - **Allergic reactions are far less common among breastfed babies.**
  - **Sucking on the breast does not harm the formation of the teeth as nipples and pacifiers can. Since breast milk does not accumulate in the mouth due to the way a baby suck, there is less tooth decay.**
  - **There is very little cost compared to formula.**

NEXT

BREAST OR FORMULA

- **FOR MOM:**
  - Breastfeeding has a calming effect. It requires you to sit down and relax.
  - The hormone oxytocin released during feeding stimulates your uterus to control blood loss and return to pre-pregnancy size.
  - Delays ovulation and resumption to periods. (Not a birth control method)
  - Women who breast feed at least 6 months lowers risk for breast cancer.
  - Increased calories needed for breast feeding help Mom lose weight faster.

Bonding with your baby can be accomplished whether you breast for formula feed. If you work, there are ways to pump to have milk available for your baby while you are away. Successful breast feeding is when you feel you are doing the best for you and your baby. It is not according to any strict rules or guidelines. Everyone in the family has a part in taking care of your baby and can be included no matter how you feed your baby.



There are Breastfeeding Classes and Support Groups available to learn the best techniques to have the best experience possible.

Call 531-3742 for information.

BACK

CIRCUMCISION

- Circumcision is a surgical procedure to remove the skin covering the end of the penis, called the foreskin. In some cultures this is a religious rite or tradition. In the United States it is an elective procedure.

- The American Academy of Pediatrics (AAP) recommendations are:

1. Problems with the penis can occur with or without circumcision.

2. There is no difference in hygiene, as long as proper care is followed.
3. There may or may not be difference in sexual sensation or practices in adult men.
4. There is an increased risk of urinary tract infection in uncircumcised males. However the incidence of urinary tract infections in males is less than 1%.
5. Circumcision does provide some protection from cancer of the penis. However the rate of penis cancer is very low.
6. The AAP has not found enough information to recommend circumcision for all babies as a routine procedure.

- There are several ways to perform a circumcision. Your doctor will tell you about the method used here at BAJCH. Since the procedure is painful to the infant, a local anesthesia is given.

- If you decide to have your male infant circumcised, you will be counseled by the doctor performing the procedure and given instructions on how to care for the penis at home.

  - Parents need to make their own decision regarding circumcision.
  - Talk to your doctor if you have any further questions.

BACK

INFANT SECURITY

- **Safety for our newborns is very important to us. For this reason we have installed a special security system call "HALO SYTEM".**
  - **An alarm band is attached to the baby's ankle with Velcro. If anyone tries to leave out of any exit point in the hospital – an alarm goes off.**
- **In addition, a set of 4 identification bands with identical information and numbers will be made at the time of birth.**
  - **Two bands are placed on the baby.**
  - **One band is placed on the mother**
  - **One band is placed on the father (or significant other as indicated by the mother)**
  - **These bands are not to be removed until after the baby has been discharged from the hospital.**
- **Also, the transport of newborns is always in the bassinet and limited to particular personal only.**

BACK

NEWBORN PROCEDURES

- There are certain procedures that all newborns will have done for their health and safety:
  - Identification bands are placed on the baby, Mom and Dad or significant other if Mom chooses. Do not remove these band until the baby is discharged from the hospital.
  - Antibiotic ointment is put into the babies eyes within 1 hour after birth to reduce the risk of the baby acquiring an infection from bacteria possibly picked up during the birth process.
  - Newborns receive an injection of Vitamin K within 1-2 hours after birth to assist in the baby's clotting response.
  - Hearing screenings are done on all babies. This will be done prior to discharge or an appointment will be made for the baby.
  - It is recommended that the baby receive their first Hepatitis B vaccine prior to discharge. Immunizations are important to reduce the risk of disease and the complications that can occur. Parents will be given an information pamphlet to read and a chance to ask any questions prior to the vaccine being given. The vaccine is given the day before discharge.

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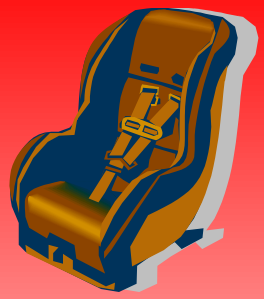
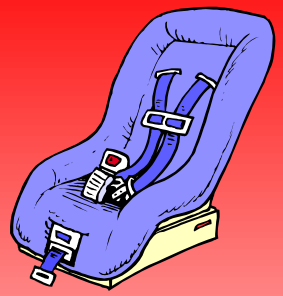


CAR SEATS



- **IT'S THE LAW-**
  - It is required by Louisiana Law that all children under the age of 3 or 60 pound or less must be in an approved car seat when ever the car is moving.
- **CAR SEAT INSPECTONS**
  - Once you have purchased your car seat it is a good idea to have it check to ensure that it fits your car properly. There are incidents where certain car seats do not fit into certain car make models.
  - Health Promotions holds a Car Seat Check event once a quarter. Watch the Guardian for announcements.
  - If you would like to have your car seat inspected prior to scheduled inspections – Call Health Promotions at 531-3014 to set up an appointment.
- **YOU MUST HAVE AN APPROVED CAR SEAT TO TAKE YOUR BABY HOME AT THE TIME OF DISCHARGE**.
  - When you and your baby are discharged from the hospital, the nursing staff will show you how to ensure that the baby is placed the car seat correctly and that the car seat is placed correctly in the car. You will asked to demonstrate that you know how to use the car seat.

BACK

AFTER DELIVERY

- **Usual hospital stay after a vaginal birth is 48 hours. For a c-section it is 3 days.**
- **You will receive instruction and assistance regarding:**
  - **Breast care – for both breast and non-breast feeding moms**
  - **Perineum care. Incision care for c-section**
  - **Information regarding methods of birth control.**
  - **Care and feeding of your baby.**
  - **Information regarding rest, nutrition, emo… exercise following delivery.**
  - **Warning Signs:**
    - **Fever > 100.6***
    - **Increased pain at perineum or incision site.**
    - **Separation or discharge from incision**
    - **Pain or redness in legs or breasts**
    - **Foul odor from vaginal discharge.**

  - **Appointments for:**
    - **Baby – 1st well baby appointment for 2 weeks.**
    - **Mom – complete request for 6-8 weeks postpartum appointment with provider. Your clinic will notify you by mail when your appointment is scheduled. If the time and date does not work for you call the clinic to reschedule.**

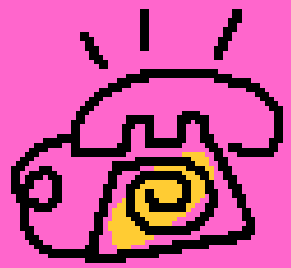
Please remember that the baby and mother is discharged separately. Do not leave until you have received

BACK

RESOURCES FOR ASSISTANCE

- Emergency Room 531-3368
- 531-3369
- Ambulance Service 531-3361
- Behavioral Health Clinic 531-3067
- BJACH Child Care Center 531-3871
- Family Practice Clinics (2nd Fl) 531-3011
- Health Benefits Rep. 531-3974
- Hospital Information 531-3118
- 531-3119
- Labor & Delivery (4th Fl.) 531-3644
- Managed Care Division 531-3908
- Newborn Nursery (4th Fl.) 531-3640
- Women's Health Clinic (4th Fl.) 531-3705
- Radiology / X-Ray 531-3376
- Patient Representatives 531-3682
- 531-3880

- Army Community Service 531-1941
- Community Health Nurse 531-2751
- Child Development Center 531-2149
- Registration 531-2900
- Food Stamps Program Leesville 238-6414
- DeRidder 463-6091
- New Parent Support 531-7065
- Social Work Service 531-3272
- TRICARE Office 531-3974
- WIC Leesville Outpatient 238-1203
- Vernon Parish Health Unit 238-6410
- DeRidder Health Unit 463-4486
- Leesville Rural Health Service 238-1203
- Vernon Parish health Unit 238-6410
- DeRidder Health Unit 463-4486



BACK

NEW PARENT SUPPORT PROGRAM

What is the New Parent Support Program?

The New Parent Support Program is a professional team of social workers who provide supportive and caring services to military families with children from birth to three years of age. Our trained, supervised home visitors have extensive knowledge of the issues confronting parents in the new millennium. These home visitors are sensitive to the unique challenges facing military families. Through a variety of programs including home visits, support groups, and parenting classes, the New Parent Support Program will help you learn to cope with stress, isolation, post-deployment reunions, and everyday demands of parenthood. This voluntary participation program was developed to assist military families in many ways that friends and family often do when you're back home

.**Who is eligible for this program?**

Army families and other military families expecting a child or with children from birth to three years of age are eligible to participate free of charge in all of the services offered.

What if we're not new parents?

Even if you've been raising your family for a few years, new ages and stages bring different challenges. The New Parent Support Program offers you the opportunity to express your concerns and ask questions about babies, infants, and young children

.**What if this is not our first baby?**

Often adding a brother or sister to the family presents a real change in the family. Demands on your time are different with more than one child in your house. The New Parent Support Program helps develop support networks and answers questions while your family experiences these changes. Sometimes even the marital relationship is stressed. We can help you to address some of these issues and open the lines of communication.

Army Community Service
Family Advocacy
New Parent Support Program
1591 Bell-Richard Ave.
Ft. Polk, LA. 71459
337-531-7065

When will you come to our home?

Home visits are arranged, when possible, at your convenience. Families can schedule visits so that both parents can be present to learn about being a parent or acquiring new skills in caring for a growing family.

What can the New Parent Support Program do for me?

This program offers expectant parents and parents of newborn and young children the opportunity to learn new skills as parents and to improve old ones. There are often many questions about the needs of blended and single families with infants and young children. The New Parent Support Program is a reliable source for answers to your questions in the privacy of your own home.

So how do we enroll?

It's easy as dialing your phone. Just give us a call 8:00-4:30, Monday-Friday at **531-7065**.

Infant Care Classes:

Classes provide parents with an understanding of what to expect during pregnancy through safely caring for your infant. Starts with "weird feelings" of early pregnancy ending with safety proofing the home.

Parenting Classes:

Classes provide "hands on" information for parents to make informed, responsible decisions about their toddlers and young children. ***Infant Massage***, ***Basic Training for Dads***, and ***Parenting with ½ the Team*** are just a few of the classes we offer.

Referrals:

Assistance with information and referrals can be provided to help you find the appropriate military and community services to meet your family's needs.

Home Visits:

This is an opportunity to form a warm, caring bond with a professional who can talk about your concerns as a parent or parent-to-be in the privacy of your own home.

BACK

WOMEN, INFANTS, AND CHILDREN (WIC)

- **WIC provides nutritional supplements to families which are categorically and financially eligible:**
  - **Pregnant Women**
  - **Breastfeeding baby under the age of 1 year**
  - **Children ages birth to 5 years**
  - **Special nutritional needs**

MAXIMUM GROSS INCOME

FAMILY SIZE	MONTHLY	ANNUALLY
1	$1,385	$16,613
2	$1,869	$22,422
3	$2,353	$28,231
4	$2,837	$34,040
5	$3,321	$39,849
6	$3,805	$45,658
7	$4,289	$51,467
8	$4,773	$57,276

FOOD STAMP PROGRAM

MAXIMUM GROSS INCOME

FAMILY	MONTHLY
1	$973
2	$1,313
3	$1,654
4	$1,994
5	$2,334
6	$2,674
7	$3,014
8	$3,354

BACK

THE PARENT REVIEW NEWSLETTERS – E-MAILS

- Congratulation on your impending delivery at Bayne-Jones Army Community Hospital (BJACH). We are so pleased you have chosen our hospital as the place to have your baby.
- We want to introduce you to a wonderful new information program we are offering to all our expectant and new parents. The BJACH weekly parenting e-mail is a service that allow us to send you information about pregnancy, birth, development and early infancy, powered by The Parent Review. The information is BJACH - specific to give more information about our services as well. This is a free service and a great way to keep up on the latest information as an expectant parent or a new parent.
- You can sign up three ways:
  - Pick up a sign-up sheet at the OB/GYN Clinic
  - Call the clinic at 531-3705 to sign up
  - Go to - http/:wwwtheparentreview.com/baynejones and sign up on line.

Today parents have more resources to help deal with the challenges of pregnancy and parenting.

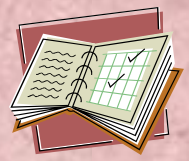
Take advantage of all these resources available to be the best informed parent possible.

BACK

Transferring OB Care to BJACH

- **If you are new to Fort Polk and have been receiving prenatal care at another facility you will need to contact the Women's Health Clinic at 531-3705 to schedule an appointment. Please bring any records with you. Be sure to tell the clerk that your are transferring your OB care to our hospital**

- **An appointment with a provider will be made as soon as possible.**
  - **If you do not have your OB records with you, please provide the name and the telephone number of your previous provider so we can request your records.**
  - **Dependent on how far along you are in your pregnancy or your need for additional information, you may be scheduled to attend OB Orientation as well.**



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GENERAL INFORMATION
Who cares for OB Patients?

- **Both Family Practice providers and women's Health Clinic providers provide prenatal care and delivery.**

- **Family Practice providers primarily take care of patients who are identified as having no or minimal risk factors that could complicate the pregnancy**

- **Women's Health providers primarily take care of patients who are identified as having significant medical or obstetrical risk factors that could complicate the pregnancy.**

CONTINUED

GENERAL INFORMATION

Can the providers at BJACH take care of “high risk” pregnancies?

- **YES! BJACH works very closely with TRICARE to assure that all patients will receive the best care possible.**

- **If care cannot be provided for the patient at BJACH then arrangements will be made for the patient to receive care at LSU or another facility within the TRICARE network.**

Back

LDRP

Opened

27 March 2006

FAMILY CENTERED CARE!!
Daddy and baby stay with you all the time.
Labor, delivery, recovery, and postpartum care provided in one room.

C-Sections done on same floor.

BACK